

Second Regular Session 115th General Assembly (2008)

PRINTING CODE. Amendments: Whenever an existing statute (or a section of the Indiana Constitution) is being amended, the text of the existing provision will appear in this style type, additions will appear in **this style type**, and deletions will appear in ~~this style type~~.

Additions: Whenever a new statutory provision is being enacted (or a new constitutional provision adopted), the text of the new provision will appear in **this style type**. Also, the word **NEW** will appear in that style type in the introductory clause of each SECTION that adds a new provision to the Indiana Code or the Indiana Constitution.

Conflict reconciliation: Text in a statute in *this style type* or ~~this style type~~ reconciles conflicts between statutes enacted by the 2007 Regular Session of the General Assembly.

## SENATE ENROLLED ACT No. 164

AN ACT to amend the Indiana Code concerning human services.

*Be it enacted by the General Assembly of the State of Indiana:*

SECTION 1. IC 12-7-2-134 IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2008]: Sec. 134. "Office" means the following:

- (1) Except as provided in subdivisions (2) ~~and (3)~~; **through (4)**, the office of Medicaid policy and planning established by IC 12-8-6-1.
- (2) For purposes of IC 12-10-13, the meaning set forth in IC 12-10-13-4.
- (3) For purposes of IC 12-15-13, the meaning set forth in IC 12-15-13-0.4.**
- ~~(3)~~ **(4)** For purposes of IC 12-17.6, the meaning set forth in IC 12-17.6-1-4.

SECTION 2. IC 12-15-13-0.4 IS ADDED TO THE INDIANA CODE AS A **NEW** SECTION TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2008]: **Sec. 0.4. As used in this chapter, "office" includes the following:**

- (1) The office of Medicaid policy and planning.**
- (2) A managed care organization that has contracted with the office of Medicaid policy and planning under this article.**
- (3) A person that has contracted with a managed care**



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**organization described in subdivision (2).**

SECTION 3. IC 12-17.6-3-2, AS AMENDED BY P.L.218-2007, SECTION 41, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2008]: Sec. 2. (a) To be eligible to enroll in the program, a child must meet the following requirements:

- (1) The child is less than nineteen (19) years of age.
- (2) The child is a member of a family with an annual income of:
  - (A) more than one hundred fifty percent (150%); and
  - (B) not more than:
    - (i) three hundred percent (300%); or
    - (ii) **the maximum percentage approved by the federal Centers for Medicare and Medicaid Services if the approved amount is less than three hundred percent (300%);**

of the federal income poverty level.

- (3) The child is a resident of Indiana.
- (4) The child meets all eligibility requirements under Title XXI of the federal Social Security Act.
- (5) The child's family agrees to pay any cost sharing amounts required by the office.

(b) The office may adjust eligibility requirements based on available program resources under rules adopted under IC 4-22-2.

SECTION 4. [EFFECTIVE JULY 1, 2008] (a) **As used in this SECTION, "commission" refers to the health finance commission established by IC 2-5-23-3.**

(b) **As used in this SECTION, "plan" refers to the Indiana check-up plan established by IC 12-15-44.2.**

(c) **As used in this SECTION, "qualified individual" refers to an individual who meets all of the Indiana check-up plan requirements under IC 12-15-44.2-9 except for the household income limitation set forth in IC 12-15-44.2-9(a)(3).**

(d) **During the 2008 interim, the commission shall study the feasibility and costs of allowing qualified individuals to participate in the plan if the state does not provide funding for coverage of the qualified individual.**

(e) **This SECTION expires December 31, 2008.**

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President of the Senate

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President Pro Tempore

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Speaker of the House of Representatives

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Governor of the State of Indiana

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